



# Reno Citizens Institute Application



Name: \_\_\_\_\_

Residential Address: \_\_\_\_\_ City, State + Zip: \_\_\_\_\_

Main Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Date of Birth (required): \_\_\_\_\_

*All potential applicants are screened before they are accepted into RCI.  
This consists of a minimal background check, mainly to be sure that no participants have outstanding warrants.*

Hobbies or special interests: \_\_\_\_\_

How long have you been a resident of the city of Reno? \_\_\_\_\_

Are you currently registered to vote? Yes No Voting Precinct (if known): \_\_\_\_\_

Occupation and Employment: \_\_\_\_\_

Community and/or civic groups of which you are affiliated: \_\_\_\_\_

Why would you like to participate in the Reno Citizens Institute? \_\_\_\_\_

## How did you hear about RCI?

- ☐ Reno Gazette-Journal ☐ News & Review ☐ Other Publication(please specify): \_\_\_\_\_
- ☐ City of Reno Website ☐ Other Site Website ☐ City of Reno Employee
- ☐ Television/Radio (please specify): \_\_\_\_\_
- ☐ Community Organization or Individual (please specify): \_\_\_\_\_

What particular question(s) would you like to have answered regarding our city? (Attach a separate sheet of paper, if needed.)

Are you able to attend all 10 sessions? (Thursdays | 6 – 9 pm) Yes No

**PLEASE NOTE:** The City of Reno does not discriminate against any person because of age, ancestry, color, disability or handicap, national origin, race, religious creed, sex, sexual orientation, or veteran status. For further information, please call 785.5858. Every provision for participants' safety will be made; however we ask that you please read and sign the following release.

**WAIVER OF LIABILITY:** In consideration of my attendance in the RCI program sponsored by the City of Reno, I agree to release the City from any liability of my injuries I may sustain or damages I may incur as a result of my attendance at said program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you have any questions,  
please contact Michael Chaump @ 775.785.5858 or chaumpm@cityofreno.com.  
Upon completion, please return this application and any additional information no  
later than **March 26, 2010** to:

City of Reno - Community Relations  
ATTN: Michael Chaump  
P.O. Box 1900  
Reno, NV 89505  
Fax: 775.334.3124